

## **PHYSICIAN ASSISTANT - R.S 37:13260.21-1360-38**

### **PART V. PHYSICIAN ASSISTANTS**

#### **§1360.21. Legislative intent**

A. Shortages of all skilled health personnel, particularly in rural areas and in the field of primary care medicine, new scientific and technological developments, and new methods of organizing health services have made the question of new uses for allied health personnel the critical issue to be resolved if our supply of health manpower is to be used effectively and productively. In its concern with the growing shortage and geographic maldistribution of health care services in Louisiana, the rising cost of health care services in the state and nationally, and the need for primary health care by thousands of Louisiana citizens, the legislature intends to establish in this Part a framework for legal recognition and development of new categories of health manpower to be known as physician assistants.

B. Physician assistants are skilled members of the health care profession who work under the supervision of licensed physicians. They are qualified to take patient histories, perform physical examinations, and order and interpret certain diagnostic tests. A physician assistant may implement treatment plans as delegated by the supervising physician and explain them to patients.

C. It is the intent of this Part to permit the more effective utilization of the skills of physicians, particularly in the primary care setting, by enabling them to delegate certain health care tasks to qualified physician assistants when such delegation is consistent with the patient's health and welfare.

D. It is the intent of this Part to encourage and permit the utilization of physician assistants by physicians and assist in the development of the physician assistant profession and allow for innovative developments of programs for the education of physician assistants. It is also the purpose of this Part to provide for a system of licensing physician assistants and regulating their relationship with supervising physicians so that a high quality of service is assured.

Added by Acts 1977, No. 753, §1. Acts 1993, No. 662, §1, eff. June 16, 1993; Acts 1997, No. 316, §1.

#### **§1360.22. Definitions**

As used in this Part:

(1) "Approved program" means a program for the education and training of physician assistants which has been formally approved by the Committee on Allied Health Education and Accreditation or its successors.

(2) "Board" means the Louisiana State Board of Medical Examiners within the Department of Health and Hospitals.

(3) "Health care organization or entity" means any entity or organization providing health care services which is licensed or regulated under Title 40 of the Louisiana Revised Statutes of 1950 or regulations promulgated by the Department of Health and Hospitals. "Health care organization or entity" shall also mean an entity commonly referred to as a physician-hospital organization or other similar entity.

(4) "Physician" means a person who is licensed to practice medicine in this state.

(5) "Physician assistant" or "assistant" means a person who is a graduate of a program accredited by the Committee on Allied Health Education and Accreditation or its successors and

who has successfully passed the national certificate examination administered by the National Commission on the Certification of Physicians' Assistants or its predecessors and who is approved and licensed by the Louisiana State Board of Medical Examiners to perform medical services under the supervision of a physician or group of physicians who are licensed by and registered with the board to supervise such assistant.

(6) "Physician assistant-certified (PA-C)" means a physician assistant who is currently certified by the National Commission on the Certification of Physicians' Assistants or its successors.

(7) "Supervising physician" means a physician who has been approved by the board to supervise a physician assistant.

(8) "Supervision" means responsible direction and control, with the supervising physician assuming legal liability for the services rendered by the physician assistant in the course and scope of the physician assistant's employment. Such supervision shall not be construed in every case to require the physical presence of the supervising physician. However, the supervising physician and physician assistant must have the capability to be in contact with each other by either telephone or other telecommunications device. Supervision shall exist when the supervising physician responsible for the patient gives informed concurrence of the action of a physician assistant, whether given prior to or after the action, and when a medical treatment plan or action is made in accordance with written clinical practice guidelines or protocols set forth by the supervising physician.

(9) "Trainee" means a person who is currently enrolled in an approved physician assistant program.

Added by Acts 1977, No. 753, §1. Acts 1993, No. 662, §1, eff. June 16, 1993; Acts 1995, No. 879, §1; Acts 1997, No. 316, §1.

#### §1360.23. Powers and duties of the board

A. The board shall have and exercise all powers and duties previously granted to it, subject to the provisions of Title 36 of the Louisiana Revised Statutes of 1950. The powers and authority granted to the board by this Part shall be subject to the provisions of Title 36 of the Louisiana Revised Statutes of 1950, and particularly R.S. 36:259(E) and R.S. 36:803. Except as otherwise provided by this Part, the board shall also have the power, in consultation with the Physician Assistants Advisory Committee, to make rules and regulations pertaining to the approval and regulation of physician assistants and the approval and regulation of physicians applying to become supervising physicians.

B. The board shall have the authority to approve or reject an application for licensure as a physician assistant. Licensure shall be valid for no more than one year but may be renewed annually.

C. The board shall have the authority to approve or reject an application by a licensed physician or physicians to act as a supervising physician, within the bounds of this Part and rules and regulations promulgated by the board.

D. The board shall make and enforce orders, rules, and regulations for the revocation or suspension of approval of licensure to act as a physician assistant, and for the revocation and suspension of approval of supervising physicians.

E. The board shall cooperate and participate in federal, state, and private programs for the training, employment, and utilization of allied health personnel.

F. The board may adopt rules and regulations as are reasonably necessary to carry out the intent, purposes, and provisions of this Part.

G. The board shall report to the legislature no later than February 1, 1994, and annually thereafter, as to:

(1) The number and types of programs which have been approved and a description of each.

(2) The number of physician assistants who have been approved and licensed under this Part and the number of physicians approved as supervising physicians under this Part.

(3) An evaluation of the programs and the acceptance of them by the community.

H. Approval may be given for a physician to be the primary supervising physician for up to two physician assistants; however, nothing in this Part shall prohibit a qualified supervising physician from acting as a supervising physician on a locum tenens basis for any physician assistants in addition to the two physician assistants for whom he is the primary supervising physician, provided that such physician shall not act as supervising physician for more than four physician assistants at any one time. In addition, a physician practicing in a group practice, partnership, professional medical corporation, or employed by a hospital or other health care organization or entity may be the primary supervising physician for up to two physician assistants. Physician assistants may be employed by a group practice or partnership of physicians or a professional medical corporation duly qualified under R.S. 12:901 et seq., as amended, or a hospital or other health care organization or entity, as long as such physician assistants are being supervised by a qualified supervising physician.

I. The board shall ensure that applicants for the program shall not be discriminated against due to race, color, creed, age, sex, disability, as defined in R.S. 51:2232(11), or national origin.

J. Notwithstanding any other provision of this Part to the contrary, any person who before and on June 16, 1993 is currently practicing as a physician assistant under supervision of a licensed physician shall be licensed as a physician assistant.

Added by Acts 1977, No. 753, §1. Acts 1993, No. 662, §1, eff. June 16, 1993; Acts 1995, No. 879, §1.

{{NOTE: SEE ACTS 1993, NO. 820, §6, WHICH AMENDED §1360.24(L), WHICH IS NOW §1360.23(I).}}

#### §1360.24. Licensure

A. Except as otherwise provided for in this Part, an individual shall be licensed by the board before the individual may practice as a physician assistant. The board may grant a license to a physician assistant applicant who:

(1) Submits an application on the forms approved by the board.

(2) Pays the appropriate fee as determined by the board.

(3) Has successfully completed an education program for physician assistants accredited by the Committee on Allied Health Education and Accreditation or its successors and who has passed the physician assistant national certifying examination administered by the National Commission on Certification of Physicians' Assistants.

(4) Certifies that he is mentally and physically able to engage in practice as a physician assistant.

(5) Has no licensure, certification, or registration as a physician assistant in any jurisdiction under current discipline, revocation, suspension, or probation for cause resulting from the applicant's practice as a physician assistant, unless the board considers such condition and agrees to licensure.

(6) Is of good moral character.

(7) Submits to the board any other information the board deems necessary to evaluate the applicant's qualifications.

(8) Has been approved by the board.

B. A personal interview of a physician assistant applicant shall be required only in those cases where the assistant is making his first application before the board and where discrepancies exist in the application or the applicant has been subject to prior adverse licensure, certification, or registration action.

C. The board may grant a working permit, which is valid for one year but may be renewed by one additional year, to a physician assistant applicant who meets the qualifications for licensure except that the applicant has not yet taken the national certifying examination or the applicant has taken the national certifying examination and is awaiting the results.

D. A working permit is valid only until the following occur:

(1) The results of an applicant's examination are available.

(2) The board makes a final decision on the applicant's request for licensure.

Acts 1993, No. 662, §1, eff. June 16, 1993. §1360.25. [Blank]

#### §1360.26. Inactive license

Any physician assistant who notifies the board in writing on forms prescribed by the board may elect to place his licensure on an inactive status. A physician assistant with an inactive status license shall be excused from payment of renewal fees and shall not practice as a physician assistant. Any licensee who engages in practice while his or her license is lapsed or on inactive status shall be considered to be practicing without a license, which shall be grounds for discipline under R.S. 37:1360.34. A physician assistant requesting restoration to active status from inactive status shall be required to pay the current renewal fees and shall be required to meet the criteria for renewal as provided for in R.S. 37:1360.27.

Added by Acts 1977, No. 753, §1. Acts 1993, No. 662, §1, eff. June 16, 1993.

#### §1360.27. Renewal

A. Each person who holds a license as a physician assistant in this state shall, upon notification from the board, renew said license by:

(1) Submitting the appropriate fee as determined by the board.

(2) Completing the appropriate forms.

(3) Meeting any other requirements set forth by the board.

B. A physician assistant seeking licensure renewal will not be required to make a personal appearance before the board, unless the assistant is currently engaged in a licensure revocation or discipline proceeding.

Added by Acts 1977, No. 753, §1. Acts 1993, No. 662, §1, eff. June 16, 1993.

#### §1360.28. Supervision of physician assistants

A. Supervision of a physician assistant shall be continuous but shall not be construed as necessarily requiring the physical presence of the supervising physician at the time and place that the services are rendered.

B. It is the obligation and responsibility of each supervising physician and physician assistant to ensure:

(1) That the physician assistant's scope of practice is identified.

(2) That delegation of medical tasks and authority is appropriate to the physician assistant's level of competence.

(3) That the relationship of, and access to, the supervising physician is defined.

(4) That a process for evaluation of the physician assistant's performance is established.

Acts 1993, No. 662, §1, eff. June 16, 1993; Acts 1997, No. 316, §1.

§1360.29. Supervising physician qualifications and registration

A. A physician applying to supervise a physician assistant must:

- (1) Be licensed and in good standing in this state.
- (2) Notify the board of his intent to supervise a physician assistant.

(3) Submit a statement to the board that he will exercise supervision over the physician assistant in accordance with any rules and regulations adopted by the board and that he will retain professional and legal responsibility for the care rendered by the physician assistant.

B. Physicians seeking to supervise a physician assistant shall be required to appear before the board upon their first application and notification to the board of their intention to supervise a physician assistant when the board finds discrepancies in the physician's application or when the physician is currently or has been previously subject to adverse licensure, certification, or registration actions.

Acts 1993, No. 662, §1, eff. June 16, 1993.

§1360.30. Notification of intent to practice

A. A physician assistant licensed in this state, prior to initiating practice, shall submit, on forms approved by the board, notification of such intent to practice. Such notification shall include:

- (1) The name, business address, and telephone number of the supervising physician.
- (2) The name, business address, and telephone number of the physician assistant.

B. A physician assistant shall notify the board of any changes in or additions to his supervising physicians within fifteen days of the date of such change or addition.

Acts 1993, No. 662, §1, eff. June 16, 1993.

§1360.31. Services performed by physician assistants

A.(1) A physician assistant performs medical services when such services are rendered under the supervision of a supervising physician. A physician assistant may have multiple supervising physicians in no more than five medical specialties or subspecialties, provided all of the physician assistant's supervising physicians are properly registered with the board in accordance with the provisions of this Part. A physician assistant may perform those duties and responsibilities that are delegated to him by his supervising physician. A physician assistant is considered to be and is deemed the agent of his supervising physician in the performance of all practice-related activities, including but not limited to assisting in surgery and the ordering of diagnostic and other medical services. A physician assistant shall not practice without supervision except in life-threatening emergencies and in emergency situations such as man-made and natural disaster relief efforts.

(2) A physician assistant may inject local anesthetic agents subcutaneously, including digital blocks or apply topical anesthetic agents when delegated to do so by a supervising physician. However, nothing in this Part shall otherwise permit a physician assistant to administer local anesthetics perineurally, pericurally, epidurally, intrathecally, or intravenously unless such physician assistant is a certified registered nurse anesthetist and meets the requirements in R.S. 37:930.

B. The practice of a physician assistant shall include the performance of medical services within the scope of his education, training, and experience, which are delegated by the supervising physician. Medical services rendered by a physician assistant may include but are not limited to:

- (1) Obtaining patient histories and performing physical examinations.

(2) Ordering or performing diagnostic procedures as delegated by the supervising physician.

(3) Developing and implementing a treatment plan in accordance with written clinical practice guidelines and protocols set forth by the supervising physician.

(4) Monitoring the effectiveness of therapeutic intervention.

(5) Suturing wounds as delegated by the supervising physician.

(6) Offering counseling and education to meet patient needs.

(7) Making appropriate referrals.

C. The activities listed above may be performed in any setting authorized by the supervising physician including: clinics, hospitals, ambulatory surgical centers, patient homes, nursing homes, other institutional settings, and health manpower shortage areas.

Acts 1993, No. 662, §1, eff. June 16, 1993; Acts 1995, No. 879, §1; Acts 1997, No. 316, §1.

#### §1360.32. Assumption of professional liability

When a physician assistant is employed by a physician or group practice of physicians or a professional medical corporation or a hospital or other health care organization or entity, the physician assistant shall be supervised by and be the legal responsibility of the employing physician or group practice or professional medical corporation or other hospital or other health care organization or entity and the supervising physician. The legal responsibility for the physician assistant's patient care activities, including care and treatment that is provided in health care facilities, shall remain that of the supervising physician, group practice of physicians, or a professional medical corporation or a hospital or other health care organization or entity.

Acts 1993, No. 662, §1, eff. June 16, 1993; Acts 1995, No. 879, §1.

#### §1360.33. Violations

The board may, exercising due process, discipline any physician assistant, as provided in R.S. 37:1360.34, who:

(1) Fraudulently or deceptively obtains or attempts to obtain a license.

(2) Fraudulently or deceptively uses a license.

(3) Violates any provision of this Part or any regulations adopted by the board pertaining to this Part.

(4) Is convicted of a felony.

(5) Is a habitual user of intoxicants or drugs to such an extent that he is unable to safely perform as a physician assistant.

(6) Has been adjudicated as mentally incompetent or has a mental condition that renders him unable to safely perform as a physician assistant.

(7) Has committed an act of moral turpitude.

(8) Represents himself as a physician.

Acts 1993, No. 662, §1, eff. June 16, 1993.

#### §1360.34. Disciplinary authority

The board, upon finding that a physician assistant has committed any offense described in R.S. 37:1360.33, may:

(1) Refuse to grant a license.

(2) Administer a public or private reprimand.

(3) Revoke, suspend, limit, or otherwise restrict a license.

(4) Require a physician assistant to submit to the care, counseling, or treatment of a physician or physicians designated by the board.

(5) Place the physician assistant on probation with the right to vacate the probationary order for noncompliance.

(6) Restore or reissue, at its discretion, a license and impose any disciplinary or corrective measure.

Acts 1993, No. 662, §1, eff. June 16, 1993.

§1360.35. Title and practice protection

A. Any person not licensed under this Part is guilty of a misdemeanor and is subject to penalties applicable to the unlicensed practice of medicine if he:

(1) Holds himself out as a physician assistant.

(2) Uses any combination or abbreviation of the term "physician assistant" to indicate that he is a physician assistant.

(3) Acts as a physician assistant without being licensed by the board.

B. An unlicensed physician shall not be permitted to use the title of "physician assistant" or to practice as a physician assistant unless he fulfills the requirements of this Part.

C. Only a physician assistant licensed under this Part who has met the current certification requirements of the National Commission on the Certification of Physicians' Assistants and its successors shall be entitled to use the designation "PA-C" before or after his name or as any title, thereof.

Acts 1993, No. 662, §1, eff. June 16, 1993.

§1360.36. Identification requirements

A physician assistant licensed under this Part shall keep his license available for inspection at his primary place of employment and shall, when engaged in his professional activities, wear a name tag identifying himself as a "physician assistant".

Acts 1993, No. 662, §1, eff. June 16, 1993.

§1360.37. Injunctive proceedings

A. The board may apply for an injunction in any court of competent jurisdiction to enjoin any person from committing any act prohibited by the provisions of this Part, or prohibited by the board by authority of this Part.

B. If it is established that any person has been or is committing any act prohibited by any provision of this Part or prohibited by the board by authority of this Part, the court shall enter a decree enjoining said person from further violation of this Part.

C. In case of violation of any injunction issued under the provision of this Part, the court shall try and punish the offender for contempt of court in accordance with law.

Acts 1993, No. 662, §1, eff. June 16, 1993.

§1360.38. Exemptions

A. The provisions of this Part shall not apply to:

(1) Practitioners of allied health fields duly licensed in accordance with other laws of this state.

(2) A physician assistant administering medical services in cases of emergency.

B. Nothing herein shall prohibit or limit the authority of physicians to employ auxiliary personnel not recognized under this Part.

Acts 1993, No. 662, §1, eff. June 16, 1993; Acts 1997, No. 316, §1.